

Intervention: Efforts to engage Head Start personnel in promoting oral health care

Finding: Insufficient evidence to determine effectiveness

Potential partners to undertake the intervention:

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| <input type="checkbox"/> Nonprofits or local coalitions | <input type="checkbox"/> Businesses or labor organizations |
| <input type="checkbox"/> Schools or universities | <input type="checkbox"/> Media |
| <input type="checkbox"/> Health care providers | <input type="checkbox"/> Local public health departments |
| <input type="checkbox"/> State public health departments | <input type="checkbox"/> Policymakers |
| <input type="checkbox"/> Hospitals, clinics or managed care organizations | <input checked="" type="checkbox"/> Other: Head Start |

Background on the intervention:

Despite high rates of dental insurance, low-income children—and specifically, Head Start children—have low frequencies of dental visits, high rates of unmet dental care needs, and high rates of tooth decay. In a 2000 article, Burton L. Edelstein outlines a number of ways for Head Start personnel to help their clients secure sufficient dental care, including:

- Acting as a liaison with dental schools, dental hygiene programs, and dental assisting programs to engage faculty in training screeners and students in performing screenings
- Acting as a liaison between Head Start centers and local dentist societies to encourage dentists to participate in donated dental service programs
- Advocating in support of local and national oral health access initiatives
- Educating clients about oral health and setting appropriate expectations about care
- Encouraging clients to receive follow-up care
- Providing clients with case management assistance
- Providing social and educational rewards to dentists

Findings from the systematic reviews:

There was insufficient evidence to determine effectiveness for this intervention. Practices that lack sufficient research to support effectiveness should not be confused with ineffective programs. Rather, they should be recognized as programs that have the potential to become evidence-based practices—if properly evaluated. Practitioners are encouraged to monitor the impact of these programs in their communities and report on their findings in order to build a base of knowledge sufficient to reach consensus.

Additional information:

National Maternal and Child Oral Health Resource Center -
www.mchoralhealth.org/HeadStart/headstart.html

References:

Edelstein BL, DDS, MPH. Access to dental care for head start enrollees. Journal of Public Health Dentistry Summer 2000; 60(3):221-232.